ENVIRONMENTAL SERVICES DEPARTMENT ENVIRONMENTAL HEALTH DIVISION MOBILE FOOD PROGRAMS

1001 North Central, Suite 350 Phoenix, AZ 85004

(602) 506-6073 Spanish Speakers (602) 506-6980 FAX (602) 506-6862

PLAN REVIEW AND PERMIT APPLICATION

PLEASE PRINT		
BUSINESS NAME		
OWNER NAME		
	_STATEZIP CODEP	
E-MAIL	CELLULAR/ PAGER #	£ ()
PRIMARY FOOD ITEMS		
ANY CORRESPONDENCE PER	TAINING TO YOUR PLAN REVIEWING	IS TO BE MAILED TO:
NAME	TITLE	
ADDRESS		
CITY	STATEZIP CODEI	PHONE ()
I <u>CERTIFY</u> THAT THESE PLAN DOCUMENTS COMPLY WITH THE CURRENT MARICOPA COUNTY ENVIRONMENTAL HEALTH CODES.		
ENVIRONMENTAL HEALTH COI	DES	
Signature(s)	Print Name(s) FEES SCHEDULE	Date
Signature(s) PLAN TYPE	Print Name(s) FEES SCHEDULE FEE EXPEDITE FEE	* PERMIT FEE
Signature(s) PLAN TYPE PUSHCART MOBILE FOOD UNIT	Print Name(s) FEES SCHEDULE	* PERMIT FEE . \$105.00 (FOR ONE YEAR) . \$175.00 (FOR ONE YEAR) . \$190.00 (FOR 2 YEARS)
Signature(s) PLAN TYPE PUSHCART	Print Name(s) FEES SCHEDULE FEE EXPEDITE FEE \$65.00\$130.00	* PERMIT FEE . \$105.00 (FOR ONE YEAR) . \$175.00 (FOR ONE YEAR) . \$190.00 (FOR 2 YEARS)
Signature(s) PLAN TYPE PUSHCART MOBILE FOOD UNIT VENDING MACHINE MOBILE PET GROOMER/SHOP TOTAL PLAN REVIEW FEE	Print Name(s) FEES SCHEDULE FEE EXPEDITE FEE \$65.00\$130.00 \$65.00\$130.00 \$65.00\$65.00 (max) P\$175.00\$210.00 (max) DUE: ST BE PAID BEFORE THE DECAL AND PER	* PERMIT FEE . \$105.00 (FOR ONE YEAR) . \$175.00 (FOR ONE YEAR) . \$190.00 (FOR 2 YEARS) \$210.00 (FOR 2 YEARS)
Signature(s) PLAN TYPE PUSHCART MOBILE FOOD UNIT VENDING MACHINE MOBILE PET GROOMER/SHOP TOTAL PLAN REVIEW FEE	Print Name(s) FEES SCHEDULE FEE EXPEDITE FEE \$65.00\$130.00 \$65.00\$65.00 (max) P\$175.00\$210.00 (max)	* PERMIT FEE . \$105.00 (FOR ONE YEAR) . \$175.00 (FOR ONE YEAR) . \$190.00 (FOR 2 YEARS) \$210.00 (FOR 2 YEARS)
Signature(s) PLAN TYPE PUSHCART	Print Name(s) FEES SCHEDULE FEE EXPEDITE FEE \$65.00\$130.00 \$65.00\$130.00 \$65.00\$65.00 (max) P\$175.00\$210.00 (max) DUE: ST BE PAID BEFORE THE DECAL AND PER	* PERMIT FEE . \$105.00 (FOR ONE YEAR) . \$175.00 (FOR ONE YEAR) . \$190.00 (FOR 2 YEARS) \$210.00 (FOR 2 YEARS) RMIT ARE ISSUED.
Signature(s) PLAN TYPE PUSHCART	Print Name(s) FEES SCHEDULE FEE EXPEDITE FEE \$65.00\$130.00 \$65.00\$65.00 (max) P\$175.00\$210.00 (max) DUE: ST BE PAID BEFORE THE DECAL AND PEI FOR OFFICE USE ONLY	* PERMIT FEE . \$105.00 (FOR ONE YEAR) . \$175.00 (FOR ONE YEAR) . \$190.00 (FOR 2 YEARS) \$210.00 (FOR 2 YEARS) RMIT ARE ISSUED.
Signature(s) PLAN TYPE PUSHCART	Print Name(s) FEES SCHEDULE FEE EXPEDITE FEE \$65.00\$130.00 \$65.00\$65.00 (max) P\$175.00\$210.00 (max) DUE: FOR OFFICE USE ONLY CEIPT # DATE RE	* PERMIT FEE . \$105.00 (FOR ONE YEAR) . \$175.00 (FOR ONE YEAR) . \$190.00 (FOR 2 YEARS) \$210.00 (FOR 2 YEARS) RMIT ARE ISSUED. ECEIVED DISTRICT [76]